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1653

Rev. 10/00

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PATENTS

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Modified PTO 1083
For Other Than A Small Entity

Attorney Docket No. VPI/94-04CIP2DIV5

Examiner : D. Lukton
Group : 1653
Applicants : Guy W. Bemis et al.
Appln. No. : 09/886,773 Confirmation No.: 6928
Filed : June 21, 2001
For : INHIBITORS OF INTERLEUKIN-1 β CONVERTING
ENZYME

EXPRESS MAIL CERTIFICATION

"Express Mail" mailing label number EV133107532US.

Date of Deposit October 24, 2002.

I hereby certify that this transmittal letter and the other papers and fees identified in this transmittal letter as being transmitted herewith are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. § 1.10 on the date indicated above and are addressed to the Hon. Commissioner for Patents, P.O. Box 2327, Arlington, VA 22202.


Lillian Garcia

Hon. Commissioner for Patents
Washington, D.C. 20231

New York, New York
October 24, 2002

TRANSMITTAL LETTER

Sir:

Transmitted herewith: [] a Preliminary Amendment;
[x] a Reply to Restriction Requirement; [] a Supplemental
Amendment; [] a substitute Specification; [] a Declaration; []
a Supplemental Declaration; [] a Power of Attorney; [] an
Associate Power of Attorney; [] formal drawings; to be filed in
the above-identified patent application.

FEE FOR ADDITIONAL CLAIMS

☒ A fee for additional claims is not required.

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The additional fee has been calculated as shown below:

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEES
TOTAL CLAIMS	- 20*	= 0	x	\$18	= \$ 0.00
INDEPENDENT CLAIMS	- 3**	= 0	x	\$84	= \$ 0.00
FIRST PRESENTATION OF A MULTIPLE DEPENDENT CLAIM				+ \$280	= \$ 0.00
* If less than 20, insert 20.				TOTAL	\$ 0.00
** If less than 3, insert 3.					

☐ A check in the amount of \$_____ in payment of the fee for additional claims is transmitted herewith.

☒ The Director is hereby authorized to charge payment of any additional fees required under 37 C.F.R. § 1.16 in connection with the paper(s) transmitted herewith, or credit any overpayment of same, to Deposit Account No. 06-1075. A duplicate copy of this transmittal letter is transmitted herewith.

☐ Please charge \$_____ to Deposit Account No. 06-1075 in payment of the fee for additional claims. A duplicate copy of this transmittal letter is transmitted herewith.

EXTENSION FEE


☐ The following extension fee is applicable to the Response filed herewith: ☐ \$110.00 extension fee for response within first month pursuant to 37 C.F.R. § 1.136(a); ☐ \$400.00 extension fee for response within second month pursuant to 37 C.F.R. § 1.136(a); ☐ \$920.00 extension fee for response within third month pursuant to 37 C.F.R. § 1.136(a); ☐ \$1,440.00 extension fee for response within

fourth month pursuant to 37 C.F.R. § 1.136(a); ☐ \$1,960.00 extension fee for response within fifth month pursuant to 37 C.F.R. § 1.136(a).

☐ A check in the amount of ☐ \$110.00 ☐ \$400.00 ☐ \$920.00 ☐ \$1,440.00 ☐ \$1,960.00 in payment of the extension fee is transmitted herewith.

☒ The Director is hereby authorized to charge payment of any additional extension fees required under 37 C.F.R. § 1.17 in connection with the paper(s) transmitted herewith, or credit any overpayment of same, to Deposit Account No. 06-1075. A duplicate copy of this transmittal letter is transmitted herewith.

☐ Please charge the ☐ \$110.00 ☐ \$400.00 ☐ \$920.00 ☐ \$1,440.00 ☐ \$1,960.00 extension fee to Deposit Account No. 06-1075. A duplicate copy of this transmittal letter is transmitted herewith.


James F. Haley, Jr. (Reg. No. 27,794)
Attorney for Applicants
Min Wang (Reg. No. 51,303)
Agent for Applicants

c/o Fish & Neave
Customer No. 1473
1251 Avenue of the Americas
New York, New York 10020-1104
Tel.: (212) 596-9000
Fax.: (212) 596-9090